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Date 14/05/20

Dear Members of the Senedd,

**Re: Health, Social Care and Sport Committee, Inquiry into the impact of the Covid-19 outbreak, and its management, on health and social care in Wales**

## Introduction

The CSP welcomes this opportunity to offer its view on the current Covid-19 response and future impact of Covid on services. Physiotherapists have played a key role in responding to the virus including, working in intensive care, working in the community to prevent hospital admissions, and undertaking rehabilitation of patients who are recovering from Covid-19. Our submission to this inquiry contains comments on the response to the virus so far, and our views on the future response required from the NHS.

## Comments from the CSP

### Overview

Physiotherapists have been working across many settings in the NHS, including in acute services. Covid patients in ITU have needed physiotherapy throughout their treatment for the virus. Physiotherapists are providing acute respiratory care and advice on proning and weaning off ventilators. Rehabilitation begins in the intensive care unit for many patients, and our members are working with patients to aid their recovery from possible [long term effects of covid](#).

Many physiotherapists in Wales have been redeployed to the community as part of the response to Covid-19. For example, a team of Physiotherapists work as part of the Community Response Teams in Conwy. At the moment, we also have members who have been redeployed into the team from MSK departments, primary and pain services, private practice, and returners. They have been able to provide an extended service over 7days a week, from 8am to 6pm, with the aim of supporting flow through the hospitals and supporting early discharges, enabling people to stay at home where possible by admission avoidance as well as then supporting rehab. We work very closely with our District nurse colleagues, social services and primary care.

Physiotherapists have proven to be adaptable and key to multi-disciplinary teams delivering health services across all settings.

The impact of this crisis on our student workforce should be monitored and mitigated as much as possible. Currently, placements have been affected which could have a longer term impact on workforce supply through further placements availability and capacity. Whilst current year 3 should be not too adversely affected in terms of being able to become fully registered physiotherapist in summer 2020, the impact on those going into their final year in academic year 2020/21 needs to be monitored.

### **Testing and PPE**

In March, Alex MacKenzie, CSP Chair of Council [wrote to all the Health Ministers around the UK](#), about PPE availability to staff. In Wales, the team shared this letter with all the Members of the Senedd and asked them to follow up with the Minister. Since then, the PPE guidance has been changed and our website reflects the guidance that should be followed. We remain concerned that physiotherapists should always have access to the appropriate PPE for an aerosol generating procedures.

The CSP supports the TUC Wales view that all key workers should know that they are entitled to testing and can access the right PPE to protect them and their colleagues

### **Technology**

During the current response to Covid-19, the CSP produced [a guide to implementing remote consultations](#). Setting up remote consultation options normally requires time, planning and incremental introduction. Our members moved rapidly to set up tele and video consultations at the start of this crisis, and have adapted their working to minimise risks to patients. Our membership has experience of using remote working and has examples of good practice to share. This includes physiotherapists using telehealth and virtual consultations in the community, with ABUHB being a good example of this. , In these extenuating circumstances the CSP endorses a more rapid approach to implementation of remote working than previously, to minimise risks of exposure to COVID-19 to patients, the public and healthcare staff.

### **Innovation**

We are encouraged by the collection of innovative work, particularly by Aneurin Bevan University Health Board. The collection of this innovative work needs to result in permanent change in the future, and for this a transparent system of evaluation needs to be in place for good practice to be found and shared.

### **Rehab services**

Rehabilitation, including physiotherapy, is essential in saving the lives of people with Covid-19 and in enabling people to live their lives to the full. Rehabilitation must be recognised as an unmissable part of Covid-19 recovery, and leaders and policy makers need to be taking urgent action to ensure that this is delivered. In delivering rehabilitation, the physiotherapy workforce is involved in every stage and at all levels of the Covid-19 trajectory. They have the skills and knowledge that are critical and must be deployed accordingly to support recovery.

Essential rehabilitation for patients, recovering from serious illness or injury must continue to be provided through the pandemic, with services adapting to make this possible. The CSP believes a comprehensive strategic approach to meeting rehabilitation needs is required as we work to help

the recovery from the pandemic. This includes the needs of people recovering from Covid-19 and those whose rehabilitation has been interrupted and whose condition has deteriorated due to the period of self-isolation and lock down.

The CSP also believes that this is an opportunity to drive improvements in rehabilitation services and development of the workforce to deliver this. This statement sets out what we believe are the priority actions required by policy makers and system leaders nationally and locally.

### **Our five rehabilitation asks of policy makers and leaders**

1. Don't leave patients behind because they are out of sight. We need rapid planning, guidance and resources in place to ensure that people recovering from Covid-19 receive rehabilitation in the community after discharge. This means enabling the agile redirection of funding and redeployment of the workforce to community teams as need in the acute sector diminishes.
2. Support essential rehabilitation services to be maintained during the pandemic as much as possible to minimise negative impact on patients who are recovering from serious injury or illness or have an exacerbation of their long-term condition.
3. Ensure the physiotherapy workforce and all those delivering rehabilitation receive the right level of PPE, to work with vulnerable people in the community for whom face to face rehabilitation is essential.
4. Plan for the tidal wave of rehabilitation need as the country recovers from the pandemic. All UK Governments should develop plans to deliver expanded high quality, multi condition community rehabilitation, and training and retaining an expanded multi-disciplinary rehabilitation workforce.
5. Commit to the right to rehabilitation as a fundamental element of our health and care system and support it to develop so that everyone can access high quality rehabilitation.

### **Right to Rehab**

We are concerned about the increased need for rehab services in the next few months, and the impact this will have on the availability of rehab services for all patients. Rehab services will face the challenge of meeting the needs of Covid-19 patients who are recovering, with serious and long term issues such as fatigue, respiratory issues, and PTSD. Services will also have to meet the needs of many patients who have de-conditioned when in self isolation, and a further group of patients who have avoided/delayed treatment until after the initial wave of the virus. This mixture of patient needs could place rehabilitation services under great strain.

We welcome the initial investment in rehab services of £10 million by the Welsh Government, accessible to the Regional Partnership Boards. However, this funding needs to be part of a wider strategic funding programme for rehabilitation services, in line with the objectives of a Healthier Wales Strategy. This would be best delivered by a national strategy/plan for rehabilitation services.

It is vital that the rehab needs of non Covid patients are planned for and resourced properly to avoid pressure on hospital admissions and other services which may be dealing with Covid patients.

### **Regional Partnership Boards**

In a written answer to question WAQ80037 (e) by Rhun ap Iorwerth AS, the Minister stated:

*“We anticipate increasing demand for rehabilitation from people recovering from coronavirus. We are preparing to meet this and the needs of others who are recovering from other conditions and have other rehabilitation needs.*

*I have announced an extra £10m to support people recovering from coronavirus, including enhanced home care packages for people dealing with the physical and mental health effects of lockdown.”*

We welcome this funding as a beginning of a wider change to the way services are delivered, in line with a Healthier Wales strategy. However, as the Minister states, we anticipate increasing demand going forward and believe an assessment and planning of the resources needed on a national scale will be beneficial. We do pose the question: How could this funding fit into a wider strategic funding programme for physiotherapy and rehabilitation services?

### **Concluding remarks**

Thank you for the opportunity to provide the CSP’s view on the current situation, and the opportunity to highlight rehabilitation as a vital part of the NHS response. Our view is that a strategy or plan is needed to deliver the Right to Rehab that patients deserve across Wales. We would welcome the opportunity to provide oral evidence if requested.

### **About the CSP and Physiotherapy**

The Chartered Society of Physiotherapy is the professional, educational and trade union body for the UK’s 59,000 chartered physiotherapists, physiotherapy students and support workers. The CSP represents 2,400 members in Wales.

Physiotherapists use manual therapy, therapeutic exercise and rehabilitative approaches to restore, maintain and improve movement and activity. Physiotherapists and their teams work with a wide range of population groups (including children, those of working age and older people); across sectors; and in hospital, community, and workplace settings. Physiotherapists facilitate early intervention, support self management and promote independence, helping to prevent episodes of ill health and disability developing into chronic conditions.

Physiotherapy delivers high quality, innovative services in accessible, responsive and timely ways. It is founded on an increasingly strong evidence base, an evolving scope of practice, clinical leadership and person-centred professionalism. As an adaptable, engaged workforce, physiotherapy teams have the skills to address healthcare priorities, meet individual needs and to develop and deliver services in clinically and cost-effective ways. With a focus on quality and productivity, physiotherapy puts meeting patient and population needs, optimising clinical outcomes and the patient experience at the centre of all it does.

Diolch yn fawr,

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**CSP Public Affairs and Policy Officer for Wales**  
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